

EXTENSION WORK

The following additions have been made to the Extension Lecture courses offered by members of the State Society to local societies. (See November, February, March, June, and July Journals for other lectures.)

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I—Obstetrics vs. Midwifery.

1. A brief historic account of the oldest branch of medicine.
2. The evils of the midwife system briefly set forth.
3. The beginning and rise of the present-day obstetrics.
 - (a) Instruments in Obstetrics.
 - (b) Anesthesia in Obstetrics.
 - (c) Surgery in Obstetrics.
 - (d) Prenatal care in Obstetrics.
 - (e) Postpartum care and follow-up.
4. Development of Obstetrics.
5. Present status of Obstetrics as a branch of medicine. Most often combined with Gynecology, sometimes with Pediatrics and occasionally practiced by itself alone.
6. The great need of better Obstetrics as shown by maternal and infantile mortality and morbidity in the United States.
7. Rewards of better Obstetrics to patients and physicians set forth.

II—Prenatal Care in Obstetrics.

1. Great value of examination of both parties prior to marriage, a matter physicians should emphasize.
2. Each married woman should have a complete physical examination before each pregnancy begins and especially before her first pregnancy. Physicians must teach laity the importance of this.
3. Physical examinations before pregnancy will disclose anemia, focal infections, pelvic deformities, and gross diseases incompatible with normal pregnancies, such as tuberculosis, syphilis, diabetes, nephritis, heart disease with hyperthyroidism, whenever present. Many married women become pregnant with diseases present, of which they are not aware.
4. Examination early in pregnancy. Anemia and focal infections are exhibited by most women who present themselves for examination.
5. Written instructions given patient at her first visit. Treatments for anemia and other troubles begin at once. Care of abdomen and breasts advised. Urine examinations, visits to doctor, diet instructions, when needed.

III—Care of the Abdomen and Breasts in Pregnancy. (Illustrated with lantern slides.)

1. Striae—formation of skin.
2. Diastasis and distension of abdominal muscles.
3. Visceroptosis, which often includes ptosis of bladder and rectum.
4. Lordosis with posture disturbances; the "pot-belly" exaggerated by use of high-heel shoes.
5. Evils of modern dress brassier, worn by most women—pendulous, flat breasts and depressed nipples. Such breasts are worse after pregnancy and lactation.
6. Means of preserving figure-profile in pregnancy and lactation.
 - (a) Massaging abdomen during the whole of pregnancy. Author's method described and illustrated.
 - (b) Supporters for pregnant abdomen. The great mistake of going without any support. Supporters during pregnancy prevent distension of abdominal muscles with weakening of voluntary powers, and later visceroptosis because of weakened muscles.
 - (c) Restoration of flat, pendulous breasts preparatory to function. Author's methods described. Maternity brassiers described and illustrated. Value of proper massage preparatory to function. Assistance of the endocrines where such assistance is clearly needed.

IV—The Toxemias of Pregnancy and their Treatments.

1. Facts causing toxemias in pregnancy.
 - (a) Organic diseases, such as nephritis, tuberculosis, diabetes, syphilis, hyperthyroid disease, active heart disease and pyelitis.
 - (b) Minor foci of infection, such as pyorrhea alveolaris, nasal catarrh, nasal sinus infection, infected tonsils, lymph adenitis, cervicitis and hemorrhoidal infection.
 - (c) Conditions secondary to disease: anemia, constipation, hyperacidity, headache, ex-

cessive nervousness and endocrine disturbances.

- (d) Types of toxemia described.
 1. Mild types and prognosis.
 2. Severe type and prognosis.

2. Treatments.

- (a) Treatments of mild type in detail.
- (b) Treatments of severe type in detail.

3. Prophylaxis of toxemia of pregnancy.

- (a) Pre-nuptial physical examination. Every girl and young woman intending marriage should be examined.
- (b) By physical examination before pregnancy is undertaken.
- (c) By pre-natal physical examination and observation of the expectant mother.
- (d) By immediate correction of anemia, eradication of focal infections, and correction of constipation, hyperacidity and the early nausea and vomiting of pregnancy.
- (e) By immediate attention to every patient whose examination shows she is an apt subject to toxemia because of poor physical condition, or evident endocrine imbalance.
- (f) By immediate treatments for mild toxemia as a preventive of more severe toxemia.

OBITUARY

ALEXANDER RICHTER CRAIG

Dr. Alexander Richter Craig, secretary of the American Medical Association, died August 25, 1922, while on his vacation. Dr. Craig had not been well for some time, but that he was seriously ill had not occurred to him nor to his friends.

The American Medical Association, as well as its constituent State and county branches, all suffer a keen loss in the passing of Dr. Craig. His usefulness to medicine and public health and to the A. M. A. as an organization cannot be fully appreciated by those who were not in intimate contact with him in the central office.

The Medical Society of the State of California extends to Dr. Craig's bereaved family and his friends our sympathies in the hour of their bereavement.

DEATHS

McGarry, John A. Died in San Francisco, July 1, 1922, aged 47 years. Graduate L. A. Dept., University of California, 1898. Member of Los Angeles County Medical Society.

Palmer, Wilton H. Died in Los Angeles, August 24, 1922, aged 72 years. Graduate of Homeo. Hosp. Coll., Ohio, 1879.

Cooke, William Henry. Died at Redondo Beach, Calif., July 28, 1922. Graduate of Queens Univ., Ontario, Canada, 1888.

Reynolds, George P. Died at San Francisco, Calif., August 4, 1922, aged 75 years. Graduate of Medical Dept., Syracuse Univ., N. Y., 1873. He was a member of Alameda County Medical Society.

Wilson, Lafayette J. Died at San Francisco, August 15, 1922, aged 38. Graduate of Hahnemann Med. Coll. of Pacific, 1915. Member of Sonoma County Medical Society.

Nash, Francis O. Died at Hollister, Calif., August 19, 1922, aged 80 years. Dr. Nash was a graduate of Bowdoin Med. School, Maine, 1868. He was a veteran of the Civil War and had been a resident of Hollister for over 50 years. Was a member of the San Benito County Medical Society.

Bond, Frederick Taylor. Died at Vallejo, Calif., August 23, 1922, aged 58. Graduate of the Medical Dept., Univ. of California, 1890. Member of Solano County Medical Society.